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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Albert J. Van Mullem

Title:

WEAR PROTECTION FOR A ROCK CRUSHING SYSTEM

Appl. No.:

Not vet assigned

Filing Date: Not yet assigned

Examiner:

Not vet assigned

Art Unit:

Not yet assigned

CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, Washington, D.C. 20231. EL640467693US (Express Mail Label Number) (Date of Deposit) (Printed Name)

## UTILITY PATENT APPLICATION TRANSMITTAL

Commissioner for Patents Box PATENT APPLICATION Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

## Albert J. Van Mullem

## Enclosed are:

- [ X ] Preliminary Amendment (2 pages).
- Specification, Claim(s), and Abstract (16 pages).
- [ X ] Informal drawings (4 sheets, Figures 1-6).
- [ X ] Executed Declaration and Power of Attorney (3 pages).
- [ X ] Assignment Recordation Cover Sheet.
- [X] Executed Assignment and Agreement (2 pages).
- [X] A check in the amount of \$40.00 for Assignment recordation.

The filing fee is calculated below:

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	Claims	- 1	ncluded in	1	Extra				Fee	–રૂં_ <b>ૄ</b>
	as Filed		Basic Fee		Claims		Rate		Totals	& =_
Basic Fee							\$710.00		\$710.00	_88 <b>≥</b> €
Total Claims:	28	-	20	=	8	×	\$18.00	=	\$144.00	
Independents:	7	- [	3	=	4	х	\$80.00	=	\$320.00	\$65 <b>2</b> 1
If any Multiple Dependent Claim(s) present: + \$270.00							=	\$0.00	s	
							SUBTOTAL:	=	\$1174.00	
[ ]	Small	Entit	ty Fees	Appl	y (subtrac	ct ½	of above):	=	\$0.00	
					TOT	AL F	ILING FEE:	=	\$1174.00	

- [X] A check in the amount of \$1,174.00 to cover the filing fee is enclosed.
- [ ] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, postdated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted.

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